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# HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

IN CHARGE OF

MARY M. RIDDLE, R.N.

## A NEW LAW

The new national law governing the sale and distribution of narcotics and opiates that is to go into effect March first will require vigilance on the part of hospitals. Many states have existing laws covering these same conditions, but this one enacted by the Federal Government outranks them all. News of the passage of the act has but just come to the writer, but hospitals are urged to send to Washington for copies, of which to make a study. Its most salient feature requires hospitals to register at the Internal Revenue Office in its district.

As one might naturally suppose, the law is not aimed at hospitals, but at that part of the drug trade which sells these drugs indiscriminately. If by taking extra precautions, though difficult, the hospitals can be useful in helping to lessen the temptations of those addicted to the so-called "drug habit," surely they will welcome the opportunity.

## SPECIAL NURSES

Much is being said and written regarding the place of the special nurse in the hospital, reference being nearly always to the graduate special in care of the private patient.

Dependence of the physician upon the nurse, modern methods for the care of the sick and modern habits of life and living, including that of granting to one's self and one's family all the luxury possible, have led to the custom of employing special nurses for a majority of those who come to our hospitals as private patients.

It has come to be an established fact in the minds of many, that patients must on no account be allowed to suffer after a surgical operation or during the course of a disease, evidence of such suffering being considered sufficient proof of the neglect of the physician or the inadequacy of the hospital or the inefficiency of the nursing staff. That the ordinary patient must be constantly treated in some way, is a cause for wonder and even astonishment to those who have been accustomed to seeing nature play a part in the repair of the body, but since constant and unremitting nursing care is the demand, it is eminently fit-

ting that such service should be rendered by the graduate special and as a natural result readers of nursing magazines have become familiar with discussions regarding special nurses, their place in the hospital family, their relation to the hospital, their duties, privileges, etc.

In the first place, the ethics of our profession teach that the hospital must in no way compete with the graduate, i.e., if the patient is financially able to pay for a graduate special, she should be furnished. It may happen that the hospital is unwilling to allow all work of this kind to pass out of its hands and away from its nurses; it will then rightly retain some of the work for its more advanced pupils, knowing that its training can not be complete without some practice for its nurses in the care of private patients. The busy superintendent would doubtless be grateful to turn each case over to a competent special nurse, but she voluntarily assumes the more difficult task of keeping some of such nursing for the good of her school, though she will hope to find sufficient among those who cannot pay.

If it is clearly understood that the hospital of the community will not compete with the graduates of that community, an *esprit de corps* for harmony and coöperation will be easily established between the two bodies and there will be little discussion regarding the rights and privileges of either.

A nurse who has undertaken the care of a special patient in the hospital is under the same obligation to the hospital as she would be to the home of the patient. It becomes her duty to observe economy in all matters, to maintain proper relations with those about her and, in general, to help make the wheels go round.

Criticisms are made of nurses who fail on these points. Hospitals are greatly affected and the superintendent is inclined to conclude that special nurses are a disturbing element, forgetting that she is suffering the hardships imposed by an individual and not by a class. The failure of the individual lies in her lack of breeding or lack of principle or both, or perchance it may be attributed to want of proper nurse training, and this particular time with its events may well suggest topics for the superintendent's next class in ethics.

Few graduate specials willingly inflict hardships upon the hospital in which they serve. If the special nurse has duties, she also has privileges. She is first of all a professional woman and as such is worthy of the honor due her profession, at least until she absolutely proves herself unfit. She will find her niche and establish herself soon after undertaking her case. Meantime, let it be assumed that she is making every effort to take good care of her patient and maintain the tradition and high ideals of the hospital.

The hospital also has duties towards its special nurses, such as providing comfortable quarters for them and sufficient relief from duty to enable them to preserve their health and perform their tasks. In this respect, many (it may almost be said most) hospitals are inadequate; it is a condition of affairs that has come upon them too suddenly to allow them to meet it as they would wish or as it should be met. There is not sufficient room to provide sleeping quarters for the increased number. Perhaps the table can hardly be made comfortable for the same reason, consequently the welcome due the special is not "with cordial spirits warm." This condition may be deplored by hospital managers, superintendents and all concerned, but it can not always be at once corrected. Patience must be exercised until it can be made right by erection of new buildings or other provisions. Hospitals in process of construction and those making additions will do well to consider the matter, for the innovation is fast settling into an established custom.

The place of the special nurse in the hospital family is of interest to both the nurse and the family. It is rather inconsistent for the superintendent of a training school to teach the nurse the propriety of maintaining her standing and dignity when on private duty and then grant her no position when she chances to nurse a private case in the hospital. Why not take her into the family, grant her the same privileges and courtesies that are given others and thus contribute to her happiness and consequently to her well being and the character of her work and incidentally create within the whole hospital an atmosphere of good will and fellowship to be felt alike by the sick patient and his nurse, as well as by the stranger who chances within the gates?

One superintendent has solved the problem of a large and sudden influx of graduate special nurses by being determined to allow only graduates of her own school to act in that capacity. In taking this position she is justified by the facts that the hospital is not well prepared to care for strangers, that graduates of the school know its methods and possibilities as well as its shortcomings, that they will be loyal to each other and the school, that they will always be a help and never the reverse, that they are good nurses and able to meet the requirements of any patient. Whenever a patient or his physician wishes to import a nurse from another school, he is calmly but firmly told it will not be possible. The hospital will gladly take the patient and do the very best possible for him, but the nurse must be of its own school. He is further told he may have a choice of the nurses on the hospital list. It may be that he will be told with regret that there are doubtless hospitals not far distant which would gladly accede to the request.

The latter being true, there is no danger that he would suffer a hardship by being prevented from securing hospital care, though an instance of turning to another hospital for this reason is as yet unknown. This custom is a form of reciprocity between the school and its graduates who never fail to respond to its call for help. Since the graduate served the school with a fealty and devotion amounting almost to consecration for three long years, is it not appropriate that the school should offer her its patronage when she is prepared to receive it?

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## TOO LATE FOR CLASSIFICATION

### COLORADO

The Colorado State Board of Nurse Examiners will meet at the Capitol Building, Denver, April 20, 21, 22, 1915, to examine applicants for registration, according to the law.

For information and application blanks apply to the secretary, Louise Perrin, R.N., Capitol Building, Denver.